

County: Oconto
WOODLANDS OF OCONTO
101 1ST STREET

Facility ID: 7660

Page 1

OCONTO 54153 Phone: (920) 834-4575
Operated from 11/3 To 12/31 Days of Operation: 59
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 50
Total Licensed Bed Capacity (12/31/03): 50
Number of Residents on 12/31/03: 16

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 10

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	Yes	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		0.0
Supp. Home Care-Personal Care	No					1 - 4 Years		0.0
Supp. Home Care-Household Services	No	Developmental Disabilities	6.3	Under 65	18.8	More Than 4 Years		0.0
Day Services	Yes	Mental Illness (Org./Psy)	31.3	65 - 74	0.0			----
Respite Care	Yes	Mental Illness (Other)	6.3	75 - 84	25.0			0.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	50.0	*****		
Adult Day Health Care	Yes	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	31.3	65 & Over	81.3	-----		
Transportation	Yes	Cerebrovascular	6.3	-----	----	RNs		15.6
Referral Service	No	Diabetes	6.3	Gender	%	LPNs		25.0
Other Services	No	Respiratory	0.0	-----	----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	12.5	Male	25.0	Aides, & Orderlies		
Mentally Ill	No		----	Female	75.0			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	1	9.1	125	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	6.3
Skilled Care	3	100.0	234	9	81.8	105	0	0.0	0	2	100.0	151	0	0.0	0	0	0.0	14	87.5
Intermediate	---	---	---	1	9.1	86	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	6.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	3	100.0		11	100.0		0	0.0		2	100.0		0	0.0		0	0.0	16	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	5.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0	75.0	25.0	16
Other Nursing Homes	75.0	Dressing	6.3	68.8	25.0	16
Acute Care Hospitals	20.0	Transferring	12.5	50.0	37.5	16
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	12.5	56.3	31.3	16
Rehabilitation Hospitals	0.0	Eating	37.5	31.3	31.3	16
Other Locations	0.0	*****				
Total Number of Admissions	20	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	0.0	Receiving Respiratory Care		12.5
Private Home/No Home Health	100.0	Occ/Freq. Incontinent of Bladder	68.8	Receiving Tracheostomy Care		6.3
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	56.3	Receiving Suctioning		6.3
Other Nursing Homes	0.0			Receiving Ostomy Care		6.3
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		12.5
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		18.8
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	0.0	With Pressure Sores	12.5	Have Advance Directives		12.5
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	4			Receiving Psychoactive Drugs		87.5

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	20.0	80.8	0.25	83.7	0.24	84.0	0.24	87.4	0.23
Current Residents from In-County	81.3	73.7	1.10	72.8	1.12	76.2	1.07	76.7	1.06
Admissions from In-County, Still Residing	65.0	19.8	3.29	22.7	2.87	22.2	2.93	19.6	3.31
Admissions/Average Daily Census	200.0	137.9	1.45	113.6	1.76	122.3	1.63	141.3	1.42
Discharges/Average Daily Census	40.0	138.0	0.29	115.9	0.35	124.3	0.32	142.5	0.28
Discharges To Private Residence/Average Daily Census	40.0	62.1	0.64	48.0	0.83	53.4	0.75	61.6	0.65
Residents Receiving Skilled Care	93.8	94.4	0.99	94.7	0.99	94.8	0.99	88.1	1.06
Residents Aged 65 and Older	81.3	94.8	0.86	93.1	0.87	93.5	0.87	87.8	0.93
Title 19 (Medicaid) Funded Residents	68.8	72.0	0.95	67.2	1.02	69.5	0.99	65.9	1.04
Private Pay Funded Residents	12.5	17.7	0.71	21.5	0.58	19.4	0.64	21.0	0.60
Developmentally Disabled Residents	6.3	0.8	7.95	0.7	8.72	0.6	9.88	6.5	0.96
Mentally Ill Residents	37.5	31.0	1.21	39.1	0.96	36.5	1.03	33.6	1.12
General Medical Service Residents	12.5	20.9	0.60	17.2	0.73	18.8	0.66	20.6	0.61
Impaired ADL (Mean)	60.0	45.3	1.32	46.1	1.30	46.9	1.28	49.4	1.21
Psychological Problems	87.5	56.0	1.56	58.7	1.49	58.4	1.50	57.4	1.53
Nursing Care Required (Mean)	9.4	7.2	1.30	6.7	1.40	7.2	1.31	7.3	1.28